

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Dismissed	Appeal Number:	2306363
Decision Date:	10/24/2023	Hearing Date:	08/28/2023
Hearing Officer:	Kimberly Scanlon	Record Open to:	09/11/2023

Appearance for Appellant:

Via video conference

Pro se

Appearance for MassHealth:

Via video conference/telephone

Jeffrey Pamphile;

Karishma Raja; Premium Billing



*The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
Board of Hearings
100 Hancock Street, Quincy, Massachusetts 02171*

APPEAL DECISION

Appeal Decision:	Dismissed	Issue:	Eligibility; Under 65; Over income
Decision Date:	10/24/2023	Hearing Date:	08/28/2023
MassHealth's Rep.:	Jeffrey Pamphile; Karishma Raja	Appellant's Rep.:	<i>Pro se</i>
Hearing Location:	Charlestown MassHealth Enrollment Center - Room 1 (Remote)	Aid Pending:	No

Authority

This hearing was conducted pursuant to Massachusetts General Laws Chapter 118E, Chapter 30A, and the rules and regulations promulgated thereunder.

Jurisdiction

Through a notice dated July 13, 2023, MassHealth notified the Appellant that her monthly premium changed because MassHealth determined there was a change in her income. (130 CMR 506.011; Exhibit 1). The Appellant filed this appeal in a timely manner on July 24, 2023. (130 CMR 610.015(B); Exhibit 2). Reduction of assistance is valid grounds for appeal. (130 CMR 610.032).

Action Taken by MassHealth

MassHealth notified the Appellant that her monthly premium changed because of a change in her income.

Issue

The appeal issue is whether MassHealth was correct in determining the Appellant's monthly premium amount.

Summary of Evidence

The MassHealth representatives appeared at the hearing *via* video conference and testified as follows: the Appellant is a household of one (1), under the age of 65 and disabled. As to income, the MassHealth representative explained that MassHealth currently has the Appellant's income listed as her receiving \$ 1852.90 per month from social security. Additionally, the Appellant receives a monthly earned income in the amount of \$ 1380.37, in accordance with the Appellant's two (2) bi-weekly paystubs.¹ The MassHealth representative testified that the Appellant's monthly earned income and social security income equates to \$ 3,323.37 per month which places her at 266.11% of the Federal Poverty Level (hereinafter "FPL"). The MassHealth representative testified that the Appellant qualifies for MassHealth CommonHealth with a premium, which is assessed because the Appellant's household income is above 133% of the FPL. The MassHealth representative explained that the Appellant's current monthly premium is \$ 57.20. The MassHealth representative testified that in terms of this appeal it there appeared to be confusion regarding the amount of notices (stating differing premium amounts) that the Appellant received. He made inquiry as to whether the Appellant's monthly income is accurate.

The Appellant appeared at the hearing *via* video conference and testified that she believed the monthly income figures are correct. The MassHealth representative explained that the reason the Appellant may have received multiple notices is because it appeared that the Appellant contacted MassHealth in March of 2023 to renew her application. At that time, her income was updated. The MassHealth representative further explained that in July of 2023, it appeared that the Appellant contacted MassHealth again and submitted her employment paystubs. He testified that each time income information is updated for a member, it generates a new premium notice, which may be the reason that the Appellant received various notices containing different monthly premium amounts. The MassHealth representative confirmed that the \$ 57.20 monthly premium amount for the month of August is accurate.

The Premium Billing representative appeared at the hearing *via* telephone and testified that the Appellant has a monthly premium due for the months of June, July, and August. She explained that for the months of June and July, the Appellant was billed \$ 190.40 for each month. She further explained that for the month of August, the Appellant was billed \$ 57.20. The Premium Billing representative testified that the reason for the differing amounts is based upon the redetermination of the Appellant's monthly income, which is made by MassHealth.

The Appellant testified that she commenced employment last fall². She explained that she contacted MassHealth a few times thereafter and submitted her paystubs in March. Immediately

¹ The MassHealth representative explained that the Appellant's earned income was calculated by using the MassHealth monthly calculation, which is the amount listed in the Appellant's bi-weekly paystub, multiplied by 2.167.

² The Appellant clarified at the hearing that she is employed for 12 hours per week.

thereafter, the Appellant received a bill for \$ 190.00. She testified that she made numerous telephone calls to MassHealth, and everyone that she spoke to agreed that the bill was excessive in comparison to the number of weekly hours that she is employed. The Appellant testified that she was told by MassHealth that her account was in the wrong system, however, the issue could not be rectified. She subsequently spoke to an employer within the Executive Office with Health and Human Services (hereinafter "EOHHS") who re-calculated her premium monthly bill to \$ 57.20, upon review of her income information.³ The Appellant explained that in June she received a monthly premium bill in the amount of \$ 18.00, which she paid. Next, the Appellant received a notice that stated she owed \$ 380.00. The Appellant testified that the \$ 190.00 figure was never correct and is unclear why she will need to pay an inaccurate amount of money.

In response, the MassHealth representative testified that the Appellant's case notes in March, state that she was ensuring that MassHealth had her correct income on file. He explained that accordingly, it appeared that MassHealth had the Appellant's accurate income on file and a redetermination was made. As to the amount that the Appellant was billed that is in dispute, the MassHealth representative explained that said notices were generated based on the Appellant's income information at that time.⁴

The record was left open until September 11, 2023 for the MassHealth representative to further review the pertinent paperwork that the Appellant submitted. The Appellant expressed her hesitation regarding whether MassHealth would rectify her billing issue because MassHealth initially created the issue.⁵ In response, the MassHealth representative clarified that he would not be re-assessing whether her current premium would change, rather, he would simply review what income information was received by MassHealth to ensure the correct income figures were correctly inputted at the time of receipt. The Premium Billing representative confirmed that the Appellant's monthly premium bill beginning in August is in the amount of \$ 57.20 and would await to hear from MassHealth regarding whether her premium bills would be adjusted for the months of June and July. Further, she confirmed that the Appellant can opt to request a monthly payment plan with the Premium Billing Customer Service Department.⁶

On September 7, 2023, the MassHealth representative provided an update on his research findings, which included the following: The Appellant's income documentation that she provided to MassHealth in March of 2023 was incorrectly inputted which resulted in an errant coverage premium of \$ 190.40 per month assessed for the months of June and July. Further, based on the

³ The Appellant made inquiry as to when she would receive her next bill, with the adjusted monthly premium. In response, the Premium Billing representative explained that she would receive it *via* mail shortly because it was recently mailed to her.

⁴ Upon inquiry, the Premium Billing representative explained her office does not perform the calculations.

⁵ The Appellant suggested that MassHealth review what months she should be billed the correct amount of \$ 57.20 and explained that she would request a payment plan to be made thereafter.

⁶ The Premium Billing representative testified that the Appellant currently has a past-due balance which may result in termination of coverage. She made inquiry as to whether the Appellant gave her permission to currently place her on a payment plan. In response, the MassHealth representative explained that the Appellant's coverage is currently protected, pending her appeal.

documentation submitted and the formula calculation for said premiums, the correct charge for the months of June and July is \$ 72.80. The MassHealth representative recommended that Premium Billing update its record to reflect the corrected amount and confirmed that the Appellant's current premium of \$ 57.20 that begins in August is correct, according to the updated documentation that MassHealth received from the Appellant in July of 2023. (Exhibit 8, pp. 4-5).

Findings of Fact

Based on a preponderance of the evidence, I find the following:

1. The Appellant is under the age of 65. (Exhibit 3).
2. On or about July 13, 2023, the Appellant was notified that her monthly premium amount changed. (Exhibit 1, pp. 1-2).
3. The Appellant received subsequent notices from MassHealth on or about July 28, 2023, March 6, 2023, and February 21, 2023, with differing premium amounts. (Testimony; Exhibit 1, pp. 3-12).
4. The Appellant timely appealed on July 24, 2023. (Exhibit 3).
5. The record was left open until September 11, 2023 for MassHealth to review whether the Appellant was correctly charged \$ 190.40 for the months of June and July of 2023. (Exhibit 7).
6. On or about September 7, 2023, MassHealth reported that the Appellant was incorrectly charged \$ 190.40 for the months of June and July and calculated the corrected amount of \$ 72.80. (Exhibit 8).
7. The MassHealth representative confirmed that the Appellant's monthly premium bill beginning in August of 2023 is \$ 57.20, based on her current income. (Exhibit 8).

Analysis and Conclusions of Law

MassHealth may make an adjustment in the matters at issue before or during an appeal period. (See, 130 CMR 610.051(B)). If the parties' adjustment resolves one or more of the issues in dispute in favor of the Appellant, the hearing officer, by written order, may dismiss the appeal in accordance with 130 CMR 610.035 as to all resolved issues, noting as the reason for such dismissal that the parties have reached agreement in favor of the appellant. *Id.*

With respect to 130 CMR 610.035, the Board of Hearings will dismiss a hearing when....

- (1) the request is not received within the time frame specified in 130 CMR 610.015;
- (2) the request is withdrawn by the appellant;
- (3) the sole issue is one of state or federal law requiring automatic change in assistance for classes of members;
- (4) the stated reason for the request does not constitute grounds for appeal as set forth in 130 CMR 610.032. Without limiting the generality of the foregoing, except as provided in 130 CMR 610.032(A)(11), no provider decision or action including, but not limited to, a provider determination about whether or the extent to which a service is medically necessary constitutes an appealable action hereunder;
- (5) the stated reason for the hearing request is outside the scope of 130 CMR 610.000 as set forth in 130 CMR 610.003;
- (6) BOH has conducted a hearing and issued a decision on the same appealable action arising out of the same facts that constitute the basis of the request;
- (7) the party requesting the hearing is not an applicant, member, or resident as defined in 130 CMR 610.004;
- (8) BOH learns of an adjustment or action that resolves all of the issues in dispute between the parties;
- (9) BOH learns that the applicant or member has passed away prior to the date of filing and there is no full compliance with 130 CMR 610.016(B) within ten days of a BOH request;
- (10) BOH learns that the applicant or member has passed away prior to the date of filing and scheduling a hearing and is not informed until the date of the hearing and there is no full compliance with 130 CMR 610.016(B); or
- (11) the appellant fails to appear at a scheduled hearing.

....

(130 CMR 610.035(A)).

In the present case, the Appellant was satisfied with the adjustment made and the explanation given by the MassHealth representative. Because the appeal issue has been resolved in the Appellant's favor, there is nothing left to dispute before the hearing officer. For the above-stated reasons, this appeal is dismissed.

Order for MassHealth

None.

Notification of Your Right to Appeal to Court

If you disagree with this decision, you have the right to appeal to Court in accordance with Chapter 30A of the Massachusetts General Laws. To appeal, you must file a complaint with the Superior Court for the county where you reside, or Suffolk County Superior Court, within 30 days of your

receipt of this decision.

Kimberly Scanlon
Hearing Officer
Board of Hearings

cc:

MassHealth Representative: Nga Tran, Charlestown MassHealth Enrollment Center, 529 Main Street, Suite 1M, Charlestown, MA 02129

Maximus Premium Billing Representative: Karishma Raja, 1 Enterprise Drive, Suite 310, Quincy, MA 02169